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AMENDMENTS TO THE CLAIMS

Presented below is a complete set of claims with current status indicators.

1.   (previously presented) In an implantable medical device for implant within a patient, a method comprising:

detecting a plurality of individual T-waves within cardiac signals;

determining an energy value and a maximum slope for each of the plurality of individual T-waves; and

detecting cardiac ischemia based on the energy values and the maximum slopes.

2.   (canceled)

3.   (previously presented) The method of claim 1 wherein detecting a plurality of T-waves comprises discarding T-waves associated with one of fusion beats and ectopic beats.

4.   (previously presented) The method of claim 1 wherein detecting T-waves comprises:

sensing bipolar signals using a bipolar lead mounted within the atria and detecting atrial events therein;

sensing unipolar signals using a unipolar lead mounted within the heart, the unipolar signals having potentially both atrial and ventricular events therein;

eliminating the atrial events from the unipolar signals to leave substantially only ventricular events therein; and

examining the ventricular events remaining within the remaining unipolar signals to identify T-waves.

5.   (previously presented) The method of claim 1 wherein detecting T-waves comprises:

identifying peaks of the T-waves; and

specifying T-wave windows based on the T-wave peaks.

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6.   (previously presented) The method of claim 5 wherein specifying T-wave windows based on the T-wave peaks comprises:

identifying a starting point of the T-wave window as commencing 150 milliseconds (ms) prior to a T-wave peak; and

identifying an ending point of the T-wave window as terminating 150 ms after the T-wave peak.

7.   (previously presented) The method of claim 1 wherein detecting T-waves comprises:

identifying peaks of ventricular depolarization events; and

specifying T-wave windows based on the depolarization event peaks.

8.   (previously presented) The method of claim 7 wherein specifying T-wave windows based on the depolarization event peaks comprises:

identifying a starting point of the T-wave window as commencing 80 milliseconds (ms) after the depolarization event peak; and

identifying an ending point of the T-wave window as terminating 480 ms after the depolarization event peak.

9.   (previously presented) The method of claim 1 wherein determining energy values associated with the plurality of T-waves comprises calculating:

$$E_{T-Wave} = \sum_{n=T_{start}}^{T_{end}} s(n)$$

wherein s(n) is a digitized version of the cardiac signal, T_{start} and T_{end} are start and end points, respectively, of the T-wave, and n represents individual samples of the digitized version of the cardiac signal.

10.   (previously presented) The method of claim 1 further comprising:

detecting a ventricular depolarization event within the cardiac signals that corresponds to the T-wave;

determining whether the T-wave was the result of a paced beat or a sinus beat; and

wherein the step of detecting cardiac ischemia based on the energy values of the T-waves takes into account whether the T-waves are the result of a paced beat or a sinus beat.

11.   (previously presented) The method of claim 10 wherein, in response to a sinus beat, detecting cardiac ischemia comprises:

determining a peak amplitude of the depolarization event that corresponds to the T-wave;

normalizing the energy values of the T-waves based on the peak amplitude of the corresponding depolarization event;

determining a running average of normalized energy values of all sinus T-waves;

calculating a difference between a current T-wave energy value and the sinus T-wave running average; and

determining whether the difference exceeds a predetermined sinus beat threshold.

12.   (previously presented) The method of claim 11 wherein, in response to a sensed beat, detecting cardiac ischemia comprises:

determining whether the sensed beat is an ectopic beat and, if so, ignoring the T-wave associated with the ectopic beat in the detection of cardiac ischemia.

13.   (previously presented) The method of claim 10 wherein, in response to a paced event, detecting cardiac ischemia comprises:

determining a measure of evoked response for the depolarization event that corresponds to the T-wave;

normalizing the energy values of the T-waves based on the evoked response of the corresponding depolarization event;

determining a running average of normalized energy values of paced T-waves;

calculating a difference between a current paced T-wave energy value and the paced T-wave running average; and

determining whether the difference exceeds a predetermined paced beat threshold.

14.   (previously presented) The method of claim 13 wherein, in response to a paced event, detecting cardiac ischemia comprises:

determining whether the paced beat is a fused beat and, if so, ignoring the T-wave associated with the fused beat in the detection of cardiac ischemia.

15.   (original) The method of claim 1 further comprising:

generating a warning signal indicative of the onset of ischemia.

16.   (original) The method of claim 15 wherein the warning signal is an internal warning signal applied directly to patient tissue and has a stimulation frequency different from any other warning signal generated by the device.

17.   (previously presented) In an implantable medical device for implant within a patient, a system comprising:

a T-wave detection subsystem operative to detect a plurality of individual T-waves in a cardiac signal;

a T-wave energy integration subsystem operative to detect a total energy for each of a plurality of the individual T-waves; and

a cardiac ischemia detection subsystem operative to detect cardiac ischemia based on the total energy of one of the individual T-waves, an average of the total energies of a plurality of the other T-waves and a threshold value.

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18.   (original) The system of claim 17 further comprising a T-wave slope determination subsystem operative to determine a maximum slope of individual T-waves and wherein the cardiac ischemia detection subsystem is further operative to exploit the maximum slope of individual T-waves in detecting cardiac ischemia.

19.   (original) The system of claim 17 further including a cardiac ischemia warning system.

20.   (original) The system of claim 17 wherein the cardiac ischemia detection subsystem includes:

a paced beat unit operative to detect cardiac ischemia based on total energies of T-waves arising from paced ventricular beats; and

a sinus beat unit operative to detect cardiac ischemia based on total energies of T-waves arising from sinus ventricular beats.

21.   (currently amended) In an implantable medical device for implant within a patient, a system comprising:

means for detecting a plurality of T-waves within cardiac signals;

means for determining energy values associated with the plurality of T-waves;

means for determining maximum slopes associated with the plurality of T-waves; <u>and</u>

means for detecting cardiac ischemia based on the energy values and the maximum slopes;~and~

~means for generating a warning signal indicative of cardiac ischemia.~

22.   (new) A method comprising:

detecting a plurality of individual T-waves in a cardiac signal;

calculating a total energy for each of a plurality of the individual T-waves; and

detecting cardiac ischemia based on the total energy of one of the individual T-waves, an average of the total energies of a plurality of the other T-waves and a threshold value.

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23.   (new) The method of claim 1 wherein products of the energy values and the maximum slopes are used to detect cardiac ischemia.